Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF FLORIDA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's	Tina First name Dannette	_	First name
	license or passport).	Middle name		Middle name
	Bring your picture identification to your	Bennett (Oct. 15. III)	_	Leature 20 (C (Oc. 15 11 11))
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3426		

Case 3:18-bk-03810-PMG Doc 1 Filed 10/30/18 Page 2 of 53

Debtor 1 Tina Dannette Bennett Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	2570 Robert Street Jacksonville, FL 32209 Number, Street, City, State & ZIP Code Duval County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code
6. Why you are choosing this district to file for bankruptcy		Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 3:18-bk-03810-PMG Doc 1 Filed 10/30/18 Page 3 of 53

Case number (if known)

7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to me under	■ Chapter 7							
		☐ Chap	oter 11						
		☐ Chap	oter 12						
		☐ Chap	oter 13						
8.	How you will pay the fee	ab or	out how yo	he entire fee when I file my petition. Please check with the clerk's office in your local court for n you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check ur attorney is submitting your payment on your behalf, your attorney may pay with a credit card or address.					
					Illments. If you choose this optio (Official Form 103A).	n, sign and attach the Application for Individuals to Pay			
		□ Ir	equest that	at my fee be wai	ved (You may request this option	only if you are filing for Chapter 7. By law, a judge may			
		ap	plies to yo	ur family size and	I you are unable to pay the fee in	ur income is less than 150% of the official poverty line to installments). If you choose this option, you must fill out all Form 103B) and file it with your petition.			
9.	Have you filed for bankruptcy within the last 8 years?	■ No.							
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is not filing this case with	☐ Yes.							
	you, or by a business partner, or by an affiliate?								
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	■ No.	Go to	ine 12.					
	residence:	☐ Yes.	Has yo	our landlord obtai	ned an eviction judgment against	you?			
				No. Go to line 1	2.				
						ludgment Against You (Form 101A) and file it as part of			

Debtor 1 Tina Dannette Bennett

Case 3:18-bk-03810-PMG Doc 1 Filed 10/30/18 Page 4 of 53

Den	ion I ma Dannette Dei	mett		Case Humber (# known)			
	_						
Par	Report About Any Bu	sinesses	You Own as a Sole Pro	prietor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.				
		☐ Yes.	Name and location of	Name and location of business			
	A sole proprietorship is a						
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if	any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City	, State & ZIP Code			
	it to this petition.		Check the appropria	te box to describe your business:			
			☐ Health Care	Business (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset	Real Estate (as defined in 11 U.S.C. § 101(51B))			
			Stockbroker	(as defined in 11 U.S.C. § 101(53A))			
			☐ Commodity E	Broker (as defined in 11 U.S.C. § 101(6))			
			☐ None of the a	above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you indicate that youns, cash-flow statement, S.C. 1116(1)(B).	the court must know whether you are a small business debtor so that it can set appropriate are a small business debtor, you must attach your most recent balance sheet, statement of and federal income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	No.	I am not filing under	Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Cha Code.	pter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am filing under Cha	apter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	y Hazardous Property o	or Any Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?				
	identifiable hazard to public health or safety? Or do you own any		If immediate attention is				
	property that needs immediate attention?		needed, why is it neede				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?				
				Number, Street, City, State & Zip Code			

Debtor 1 Tina Dannette Bennett

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Part 6: Answer These Questions for Reporting Purposes	
16. What kind of debts do you have? 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8 individual primarily for a personal, family, or household purpose."	3) as "incurred by an
☐ No. Go to line 16b.	
■ Yes. Go to line 17.	
16b. Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obta money for a business or investment or through the operation of the business or investment.	ain
☐ No. Go to line 16c.	
☐ Yes. Go to line 17.	
16c. State the type of debts you owe that are not consumer debts or business debts	
17. Are you filing under	
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will	ministrative expenses
be available for	
18. How many Creditors do you estimate that you owe? □ 1-49 □ 1,000-5,000 □ 25,001-50,000 □ 50-99 □ 5001-10,000 □ 50,001-100,000 □ 100-199 □ 10,001-25,000 □ More than 100,000	0
19. How much do you estimate your assets to be worth? □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$0 million □ \$1,000,000,001 - \$0 million □ \$1,000,000,001 □ \$100,000,001 - \$100 million □ \$10,000,000,001 □ \$100,000,001 - \$500 million □ \$100,000,001 - \$500 million □ \$100,000,001 - \$500 million	1 - \$10 billion 01 - \$50 billion
20. How much do you estimate your liabilities to be? □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$50 million □ \$1,000,000,001 - \$50 million □ \$10,000,000,001 - \$100 million □ \$10,000,000,001 - \$500 million □ \$10,000,000,001 - \$500 million □ \$100,000,001 - \$500 million □ \$100,000,001 - \$500 million	1 - \$10 billion 101 - \$50 billion
Part 7: Sign Below	
For you I have examined this petition, and I declare under penalty of perjury that the information provided is true as	nd correct.
If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, United States Code. I understand the relief available under each chapter, and I choose to proceed under 0	
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me document, I have obtained and read the notice required by 11 U.S.C. § 342(b).	fill out this
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	
I understand making a false statement, concealing property, or obtaining money or property by fraud in co bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. and 3571. /s/ Tina Dannette Bennett	
Tina Dannette Bennett Signature of Debtor 2 Signature of Debtor 1	
Executed on MM / DD / YYYYY Executed on MM / DD / YYYYY	

Case 3:18-bk-03810-PMG Doc 1 Filed 10/30/18 Page 7 of 53

Debtor 1 Tina Dannette Be	nnett	Ca	se number (if known)
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition under Chapter 7, 11, 12, or 13 of title 11, United Stat for which the person is eligible. I also certify that I have the person is eligible.	es Code, and have	explained the relief available under each chapter
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, certificated schedules filed with the petition is incorrect.		
	/s/ Michael Ross Cleaveland	Date	October 30, 2018
	Signature of Attorney for Debtor		MM / DD / YYYY
	Michael Ross Cleaveland 0166448 Printed name		
	Cleaveland & Cleaveland, P.L.		

10001 Gate Parkway North Jacksonville, FL 32246 Number, Street, City, State & ZIP Code

Contact phone **904-642-2040**

Email address jaxconsumer@cc-lawoffice.com

0166448 FL Bar number & State

Case 3:18-bk-03810-PMG Doc 1 Filed 10/30/18 Page 8 of 53

Fill	in this information to identify your case:		
Deb	otor 1 Tina Dannette Bennett		
Dak	First Name Middle Name Last Name		
	use if, filing) First Name Middle Name Last Name		
Uni	ted States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA		
	se number	_	ck if this is an
		anic	maea ming
∩f	ficial Form 106Sum		
	mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
Be a	is complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend or original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		ring correct
		Your	assets
			e of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	46,129.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	12,528.48
	1c. Copy line 63, Total of all property on Schedule A/B	\$	58,657.48
Par	t 2: Summarize Your Liabilities		
		Your	liabilities
		Amou	unt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	67,513.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	3,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	29,050.00
	Your total liabilities	\$	99,563.00
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,299.26
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,464.92
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other s	chedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a person	al, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	s box and	submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 3:18-bk-03810-PMG Doc 1 Filed 10/30/18 Page 9 of 53

Debtor 1 Tina Dannette Bennett

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 2,881.94

One Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total o	claim
9a. Domestic support obligations (Copy line 6a.)	\$	3,000.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	9,370.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	12,370.00

Fill in this infor							
	rmation to identify y	our case and th	nis filing	j:			
Debtor 1	Tina Dannette						
Debtor 2	First Name	Middle	Name	Last Name			
Spouse, if filing)	First Name	Middle	Name	Last Name			
United States B	Bankruptcy Court for t	he: MIDDLE DI	ISTRICT	T OF FLORIDA			
Case number							☐ Check if this is ar
]	amended filing
Official Fo	orm 106A/B						
_	le A/B: Pr	opertv					12/15
		<u> </u>	an asset	only once. If an asset fits in more than one	category, lis	st the asset in t	
	r have any legal or equ			Estate You Own or Have an Interest In ence, building, land, or similar property?			
■ Yes. Where	e is the property?						
	hart Straat		What	is the property? Check all that apply			
2570 Rob	bert Street ss, if available, or other descr	ription	What ■ □	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	the amount	t of any secured	ims or exemptions. Put I claims on <i>Schedule D:</i> as <i>Secured by Property</i> .
2570 Rob Street address	is, if available, or other descr			Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount Creditors V	t of any secured Who Have Claim	I claims on Schedule D: as Secured by Property. Current value of the
2570 Rob Street address	is, if available, or other descr	32209-0000 ZIP Code		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount Creditors V	t of any secured Who Have Claim alue of the perty?	d claims on Schedule D: ns Secured by Property.
2570 Rob Street address	ville FL	32209-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Current va entire prop	t of any secured who Have Claim alue of the perty? 46,129.00	Current value of the portion you own? \$46,129.00 Secured by Property.
2570 Rob Street address	ville FL	32209-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	Current va entire proj	t of any secured who Have Claim alue of the perty? 46,129.00	Current value of the portion you own? \$46,129.00
2570 Rob Street address Jacksonv City	ville FL	32209-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current va entire proj	t of any secured Who Have Claim alue of the perty? 46,129.00 the nature of your service of the complete the c	Current value of the portion you own? \$46,129.00 Secured by Property.
2570 Rob Street address	ville FL	32209-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	Current va entire prop \$4 Describe t (such as fa a life estat	t of any secured who Have Claim alue of the perty? 46,129.00 che nature of your ee simple, tenate), if known.	Current value of the portion you own? \$46,129.00 our ownership interest ancy by the entireties, or
Jacksonv City	ville FL	32209-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current va entire prop	t of any secured who Have Claim alue of the perty? 46,129.00 the nature of your ee simple, tenate), if known.	Current value of the portion you own? \$46,129.00 Secured by Property.
Jacksonv City	ville FL	32209-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current va entire prop	t of any secured who Have Claim alue of the perty? 46,129.00 the nature of your ee simple, tenate), if known.	Current value of the portion you own? \$46,129.00 our ownership interest ancy by the entireties, or
Jacksonv City	ville FL	32209-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this iter	Current va entire prop	t of any secured who Have Claim alue of the perty? 46,129.00 the nature of your ee simple, tenate), if known.	Current value of the portion you own? \$46,129.00 our ownership interest ancy by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debto	or 1 T	ina Dannette	Bennett	c	Case number (if known)	
3. Ca	rs, vans,	trucks, tracto	rs, sport utility vel	hicles, motorcycles		
	Nο					
_ ·						
3.1	1 Make: 2015			Who has an interest in the property? Check one		d claims or exemptions. Put cured claims on Schedule D:
	Model:	Optima		Debtor 1 only		Claims Secured by Property.
	Year:	Kia		Debtor 2 only	Current value of the	Current value of the
		nate mileage: - formation:	38000	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
	Otherin	omation.		At least one of the debtors and another		
				☐ Check if this is community property (see instructions)	\$10,000.00	\$10,000.00
4. W a	tercraft.	aircraft. moto	r homes. ATVs an	d other recreational vehicles, other vehicles, a	nd accessories	
	,	,	,	tercraft, fishing vessels, snowmobiles, motorcycle		
1 🔳						
	Yes					
5 Ac	dd the do	ollar value of the	ne portion you ow	n for all of your entries from Part 2, including a	ny entries for	
				that number here		\$10,000.00
_						
Part 3			al and Household Ite			Current value of the
ро ус	ou own c	or nave any leg	gai or equitable int	terest in any of the following items?		portion you own? Do not deduct secured claims or exemptions.
		goods and fu		, china, kitchenware		•
	No	ічіајог аррпапо	es, iumiture, imens,	, cilila, kilciletiware		
	Yes. De	scribe				
		г	0 ()			
				eat, entertainment center, 2 end tables, ott ble and four chairs, china cabinet, microw		
				size bed with dresser and mirror, clothes		
				resser, twin bed, computer desk, cabinet f		\$400.00
			patio set with to	our chairs, gas fireplace, and charcoal gril	1.	Ψ+00.00
		-				
		L	Weed eater and	edger		\$15.00
	ectronics		d radios: audio vido	eo, stereo, and digital equipment; computers, printe	ore coappore; music colle	actions: alactronic davisos
LX	•			edia players, games	515, Scarniers, music cone	ections, electronic devices
	No					
	Yes. De	scribe				
		Г	TV lanton DVD	player, sound bar, and small radio.		\$175.00
		L	TV, Iaptop, DVD	player, sourid bar, and small radio.		Ψ175.00
		г				*
			Washer and dry	er		\$200.00
		s of value Antiques and fi	aurines: naintinas i	prints, or other artwork; books, pictures, or other a	rt ohiects: stamp coin or	hasehall card collections:
LX			guriries, pairitings, i ns, memorabilia, col		it objects, stamp, com, or	basebali cara collections,
	No					
	Yes. De	scribe				

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1	Tina Dannet	te Bennett	Case	e number (if known)	
		2 bronze sculptures			\$100.00
Examp.	nent for sports an les: Sports, photo musical instru	graphic, exercise, and other hobby	equipment; bicycles, pool tables, golf c	lubs, skis; canoes a	nd kayaks; carpentry tools;
		Treadmill and small bicycle			\$50.00
■ No		s, shotguns, ammunition, and related	d equipment		
□ No		othes, furs, leather coats, designer v	vear, shoes, accessories		
		Clothes and Wearing Appare	el		\$35.00
□ No		welry, costume jewelry, engagemen	t rings, wedding rings, heirloom jewelry	/, watches, gems, go	old, silver
		Costume Jewelry			\$25.00
Exam, ■ No □ Yes. 14. Any of ■ No	arm animals ples: Dogs, cats, Describe ther personal an Give specific inf	d household items you did not alı	eady list, including any health aids	you did not list	
		of all of your entries from Part 3, in	ncluding any entries for pages you	have attached	\$1,000.00
Part 4: De	escribe Your Finan	cial Assets			
Do you ov	wn or have any l	egal or equitable interest in any o	f the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No		have in your wallet, in your home, in	a safe deposit box, and on hand wher	n you file your petition	n
Exam _i □ No		avings, or other financial accounts; If you have multiple accounts with tl	certificates of deposit; shares in credit one same institution, list each. Institution name:	unions, brokerage ho	ouses, and other similar

Official Form 106A/B Schedule A/B: Property page 3

De	ebtor 1	Tina Danne	tte Benn	ett	Case number	er (if known)
			17.1.	Checking	Alive Credit Union	\$11.98
			17.2.	Savings	Alive Credit Union	\$9.00
			17.3.	Savings	Alive Credit Union (joint account with daughter)	\$7.50
	Examp ■ No	oles: Bond fund			brokerage firms, money market accounts	
	⊔ Yes			Institution or issu	ler name:	
		ublicly traded senture	stock and	interests in inco	rporated and unincorporated businesses, including	an interest in an LLC, partnership, and
		Give specific in		about them me of entity:		rship:
	Negoti Non-ne	able instrumen	ts include p	ersonal checks,	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	
	■ No	O::	f	4 4 1		
	⊔ Yes.	Give specific in		about them uer name:		
		ment or pension bles: Interests in), 403(b), thrift savings accounts, or other pension or pr	ofit-sharing plans
	Yes.	List each accou		ely. of account:	Institution name:	
					Retirement: Lincoln	\$1,500.00
	Your s Examp ■ No	ty deposits and hare of all unus bles: Agreemen	ed deposit	s you have made	e so that you may continue service or use from a compa nt, public utilities (electric, gas, water), telecommunication Institution name or individual:	ny ons companies, or others
	Annuit ■ No	ies (A contract	for a perio	dic payment of m	oney to you, either for life or for a number of years)	
	Yes	1	ssuer nam	e and description	ı.	
	26 U.S.	ts in an educat C. §§ 530(b)(1)			a qualified ABLE program, or under a qualified state	tuition program.
	■ No □ Yes		nstitution r	name and descrip	tion. Separately file the records of any interests.11 U.S.	C. § 521(c):
	Trusts, ■ No	, equitable or f	uture inte	rests in property	(other than anything listed in line 1), and rights or	powers exercisable for your benefit
		Give specific in	nformation	about them		
					and other intellectual property ceeds from royalties and licensing agreements	

Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Give specific information about them...

D	ebtor 1	Tina Danne	ette Bennett	Case number (if known)	
27	Examp ■ No	oles: Building pe	, and other general intangibles ermits, exclusive licenses, cooperative association ho formation about them	ldings, liquor licenses, professional licenses	
M	oney or	property owed	I to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28	■ No	funds owed to	you formation about them, including whether you already	filed the returns and the tax years	
29	Examp ■ No	support bles: Past due c	or lump sum alimony, spousal support, child support, r	naintenance, divorce settlement, property se	ettlement
30	Examp ■ No	oles: Unpaid wa	cone owes you ges, disability insurance payments, disability benefits inpaid loans you made to someone else information	, sick pay, vacation pay, workers' compensa	ation, Social Security
31	Examp ■ No		e policies ability, or life insurance; health savings account (HSA) rance company of each policy and list its value.	s); credit, homeowner's, or renter's insurance	3
			Company name:	Beneficiary:	Surrender or refund value:
32	If you a someo		erty that is due you from someone who has died ary of a living trust, expect proceeds from a life insurant	ance policy, or are currently entitled to receiv	e property because
33	Examp ■ No		parties, whether or not you have filed a lawsuit or employment disputes, insurance claims, or rights to solution		
34	■ No	contingent and	I unliquidated claims of every nature, including co	ounterclaims of the debtor and rights to s	et off claims
35	■ No	ancial assets Give specific in	you did not already list nformation		
	☐ Yes.				
36	6. Add t		e of all of your entries from Part 4, including any e t number here	. • •	\$1,528.48
	6. Add t for Pa	art 4. Write tha	, ,		\$1,528.48
P a	6. Add to for Part 5: Des Do you con No. Go	art 4. Write tha scribe Any Busi own or have any	t number here	ist any real estate in Part 1.	\$1,528.48

Official Form 106A/B Schedule A/B: Property page 5

Case 3:18-bk-03810-PMG Doc 1 Filed 10/30/18 Page 15 of 53

Deb	or 1 Tina Dannette Bennett		Case number (if known)	
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. [Do you own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
_	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
	oo you have other property of any kind you did not already list	?		
	Examples: Season tickets, country club membership			
	No Yes. Give specific information			
	res. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
	, , , , , , , , , , , , , , , , , , ,			
Part	List the Totals of Each Part of this Form			
	5			
55.	Part 1: Total real estate, line 2		·····	\$46,129.00
56.	Part 2: Total vehicles, line 5	\$10,000.00		
57.	Part 3: Total personal and household items, line 15	\$1,000.00		
58.	Part 4: Total financial assets, line 36	\$1,528.48		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$12,528.48	Copy personal property total	\$12,528.48
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$58,657.48

Official Form 106A/B Schedule A/B: Property page 6

						-			
FΠ	l in this inform	ation to identify your case:				4			
De	ebtor 1	Tina Dannette Bennett	Middle Name	L	_ast Name				
De	ebtor 2								
(Sp	ouse if, filing)	First Name	Middle Name	L	Last Name				
Un	ited States Bar	kruptcy Court for the: MID	DLE DISTRICT OF FLO	RIDA	<u> </u>				
Ca	se number								
	nown)					☐ Che	eck if this is an		
						ame	ended filing		
Oi	fficial For	m 106C							
			rty Vou Cla	ılm	as Evemnt		4/4.0		
<u> </u>	Chedule	C: The Prope	ity fou Cia	11111	i as exempt		4/16		
the nee cas	property you list eded, fill out and e number (if kn	sted on <i>Schedule A/B: Propert</i> I attach to this page as many o own).	y (Official Form 106A/B) copies of <i>Part 2: Addition</i>	as yo nal Pa	ther, both are equally responsible for bur source, list the property that you age as necessary. On the top of any	claim as exempt. additional pages	. If more space is , write your name and		
spe any fun exe	ecific dollar am applicable stade ds—may be un emption to a pa	ount as exempt. Alternative atutory limit. Some exemption alimited in dollar amount. Ho	ly, you may claim the fons—such as those for owever, if you claim an	iull fa r heal r exer	ount of the exemption you claim. ir market value of the property be th aids, rights to receive certain to nption of 100% of fair market valuder determined to exceed that amoun	eing exempted up benefits, and tax- ue under a law th	p to the amount of -exempt retirement nat limits the		
Pa	rt 1: Identify	the Property You Claim as	Exempt						
1.	Which set of	exemptions are you claimin	g? Check one only, eve	n if yo	our spouse is filing with you.				
	_	iming state and federal nonba	•	•	, , ,				
	_	-		11 0.0	5.0. 8 522(0)(5)				
		iming federal exemptions. 11							
2.		For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
		on of the property and line on hat lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws the	at allow exemption			
			Copy the value from Schedule A/B						
		Street Jacksonville, FL	\$46,129.00		100%		rt. X, § 4(a)(1);		
	32209 Duva Line from Sch				100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ani 222.02	n. §§ 222.01 &		
	Kia 2015 Op	otima 38000 miles	\$10,000.00		\$1,000.00	Fla. Stat. An	n. § 222.25(1)		
	Ellio Holli Goli	oddio 7 v D. Gil			100% of fair market value, up to any applicable statutory limit				
		veseat, entertainment d tables, ottomon, dining	\$400.00		\$400.00	Fla. Const. a	rt. X, § 4(a)(2)		
	room table a cabinet, mid size bed wit clothes che	and four chairs, china crowave cabinet, queen th dresser and mirror, st, twin bed with dresser omputer desk, cabinet for	,		100% of fair market value, up to any applicable statutory limit				
	Weed eater		\$15.00		\$15.00	Fla. Const. a	rt. X, § 4(a)(2)		
	Line from Sch	edule A/B: 6.2			100% of fair market value, up to any applicable statutory limit				

Official Form 106C

Case 3:18-bk-03810-PMG Doc 1 Filed 10/30/18 Page 17 of 53

		Case number (if known)	
Current value of the portion you own Copy the value from Schedule A/B			Specific laws that allow exemption
\$175.00	•	\$175.00	Fla. Const. art. X, § 4(a)(2)
		100% of fair market value, up to any applicable statutory limit	
\$200.00		\$200.00	Fla. Const. art. X, § 4(a)(2)
		100% of fair market value, up to any applicable statutory limit	
\$100.00	•	\$100.00	Fla. Const. art. X, § 4(a)(2)
		100% of fair market value, up to any applicable statutory limit	
\$50.00		\$50.00	Fla. Const. art. X, § 4(a)(2
		100% of fair market value, up to any applicable statutory limit	
\$35.00		\$35.00	Fla. Const. art. X, § 4(a)(2
		100% of fair market value, up to any applicable statutory limit	
\$25.00		\$25.00	Fla. Const. art. X, § 4(a)(2)
		100% of fair market value, up to any applicable statutory limit	
\$1,500.00		100%	Fla. Stat. Ann. § 222.21(2)
		100% of fair market value, up to any applicable statutory limit	
		led on or after the date of adjustmer	nt.)
red by the exemption wi	thin 1	,215 days before you filed this case	?
	\$175.00 \$100.00 \$100.00 \$1,500.00 \$1,500.00	\$175.00	Current value of the portion you own Copy the value from Schedule A/B \$175.00 \$175.00 \$175.00 \$100% of fair market value, up to any applicable statutory limit \$100.00 \$100% of fair market value, up to any applicable statutory limit \$100.00 \$100% of fair market value, up to any applicable statutory limit \$50.00 \$100% of fair market value, up to any applicable statutory limit \$50.00 \$100% of fair market value, up to any applicable statutory limit \$35.00 \$35.00 \$100% of fair market value, up to any applicable statutory limit \$25.00 \$25.00 \$100% of fair market value, up to any applicable statutory limit \$25.00 \$100% of fair market value, up to any applicable statutory limit \$1,500.00 \$100% of fair market value, up to any applicable statutory limit

Fill in this information to id	landifu waw					
Fill in this information to id	entity you	r case:				
	annette B	*******				
First Name		Middle Name	Last Name			
Debtor 2 (Spouse if, filing) First Name		Middle Name	Last Name			
United States Bankruptcy Co	ourt for the:	MIDDLE DISTRICT OF F	LORIDA			
Case number						
(if known)					☐ Check	if this is an
					amend	ed filing
O(() : 1 E 400D						
Official Form 106D						
Schedule D: Cre	ditors	Who Have Clair	ms Secure	d by Property	y	12/15
Be as complete and accurate as is needed, copy the Additional F number (if known).						
1. Do any creditors have claims	secured by	your property?				
☐ No. Check this box an	nd submit th	nis form to the court with your	other schedules. Y	ou have nothing else to	o report on this form.	
Yes. Fill in all of the in		•		9	·	
		Jeiow.				
Part 1: List All Secured (Claims			Column A	Column B	Column C
List all secured claims. If a c for each claim. If more than one much as possible, list the claims	creditor has	a particular claim, list the other of	reditors in Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
0.4 Cormov Auto Finan		Describe the wrewerty that as	aaa tha alaim.	value of collateral.	claim	If any
2.1 Carmax Auto Finan	ce	Describe the property that se		\$16,244.00	\$10,000.00	\$6,244.00
225 Chastain Meado	ows	Kia 2015 Optillia 30000	IIIIes			
Ct. NW	0113					
Kennesaw, GA		As of the date you file, the cla apply.	im is: Check all that			
30144-5841		Contingent				
Number, Street, City, State & Z	ip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt? Check or	ne.	Nature of lien. Check all that				
Debtor 1 only		An agreement you made (su car loan)	uch as mortgage or see	cured		
Debtor 2 only		- Cai ioan)				
Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax li	,			
☐ At least one of the debtors an		☐ Judgment lien from a lawsui				
☐ Check if this claim relates to community debt	o a	☐ Other (including a right to of	fset)			
Date debt was incurred 06/0	4/2016	Last 4 digits of accour	t number <u>xxxx</u>			
Cunnindian di non						
2.2 Specialized Loan Servicing		Describe the property that se	cures the claim:	\$51,269.00	\$46,129.00	\$5,140.00
Creditor's Name		2570 Robert Street Jac			<u> </u>	
		32209 Duval County	,			
		As of the date you file, the cla	im is: Chack all that			
P.O. Box 266005		apply.	IIII 15. Check all that			
Littleton, CO 80163		Contingent				
Number, Street, City, State & Z	ip Code	☐ Unliquidated				
Who owes the debt? Check or	ne	☐ Disputed Nature of lien. Check all that	annly			
_	110.	☐ An agreement you made (su		cured		
Debtor 1 only		car loan)	den as mortgage or set	cuicu		
☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax li	en mechanic's lion)			
☐ At least one of the debtors an	nd another	☐ Judgment lien from a lawsui				
☐ Check if this claim relates to		☐ Other (including a right to of				
community debt	- =	Caller (more dailing a right to of				
Date debt was incurred		Last 4 digits of accour	nt number XXXX			
- a.s door mas intouriou		Last - algits of accoun				

Official Form 106D

Debtor	1 Tina Dannet	te Bennett		Case numb		
	First Name	Middle Name	Last Name			
Add th	ne dollar value of y	our entries in Column A on	this page. Write that numbe	r here:	\$67,513.00	
	is the last page of that number here:	your form, add the dollar va	alue totals from all pages.		\$67,513.00	
Part 2:	List Others to	Be Notified for a Debt Th	nat You Already Listed			
trying to	collect from you fe creditor for any c	or a debt you owe to some	oout your bankruptcy for a d one else, list the creditor in l n Part 1, list the additional c	Part 1, and then list the	collection agency here. Sir	nilarly, if you have more
	lame, Number, Stree	et, City, State & Zip Code ervices		On which line in Par	t 1 did you enter the creditor	? _2.2_
F	PO Box 517314			Last 4 digits of acco	unt number	
_	Franklin St					
1	itusville, PA 1	6354				

Fill i	n this inform	nation to identify your case:						
Debt	or 1	Tina Dannette Bennett						
		First Name	Middle Name	Last Name	е			
Debt (Spous	or 2 se if, filing)	First Name	Middle Name	Last Name	e			
Unite	ed States Bar	hkruptcy Court for the: MIDE	LE DISTRICT OF FL	ORIDA				
Cooc	numbor							
(if know	e number wn)						_	if this is an ded filing
Offic	cial Form	106F/F						
		/F: Creditors Who F	lave Unsecur	ed Claim	S			12/15
any ex Sched Sched left. At	cecutory controllule G: Execution Italian Italia	accurate as possible. Use Part 1 racts or unexpired leases that co- ory Contracts and Unexpired Lea- ors Who Have Claims Secured by tinuation Page to this page. If you ther (if known).	uld result in a claim. A uses (Official Form 106 Property. If more spac I have no information t	lso list executo G). Do not inclu e is needed, co	ory contract ude any cre opy the Part	s on Schedule A/B: ditors with partially you need, fill it out,	Property (Official For secured claims that a number the entries i	rm 106A/B) and on are listed in in the boxes on the
		rs have priority unsecured claims						
_	No. Go to Pa	• •						
	Yes.							
ic p P	dentify what typ lossible, list the Part 1. If more the	priority unsecured claims. If a cree of claim it is. If a claim has both pectations in alphabetical order according han one creditor holds a particular of the claim, see the in	riority and nonpriority an ling to the creditor's nam claim, list the other credit	nounts, list that one. If you have motors in Part 3.	claim here a nore than two	nd show both priority	and nonpriority amoun	its. As much as
2.1	IRS		Last 4 digits of ac	count number		\$3,000.00		
	Priority Cre		When was the de		2015			
		phia, PA 19101-7346 reet City State Zlp Code	As of the date you	u file, the claim	is: Check a	Ill that apply		
	Who incurred	the debt? Check one.	☐ Contingent	•				
	Debtor 1 or	nly	☐ Unliquidated					
	Debtor 2 or	nly	☐ Disputed					
	Debtor 1 ar	nd Debtor 2 only	Type of PRIORITY	f unsecured cla	aim:			
	☐ At least one	e of the debtors and another	■ Domestic supp	ort obligations				
	☐ Check if th	nis claim is for a community deb	t ☐ Taxes and cert	ain other debts y	ou owe the	government		
		ubject to offset?	☐ Claims for deat	th or personal inj	jury while yo	u were intoxicated		
	■ No		☐ Other. Specify	2045				-
	Yes			2015 taxes	.			
Part	2: List Al	of Your NONPRIORITY Unse	cured Claims					
3. D	o any credito	rs have nonpriority unsecured cl	aims against you?					
	☐ No. You hav	e nothing to report in this part. Sub-	mit this form to the court	with your other	schedules.			
	Yes.							
u th	nsecured claim	nonpriority unsecured claims in n, list the creditor separately for eac or holds a particular claim, list the ot	h claim. For each claim l	listed, identify wh	nat type of c	laim it is. Do not list cl	aims already included	in Part 1. If more

Official Form 106 E/F

Total claim

Debtor	1 Tina Dannette Bennett	Case number (if know)				
4.1	Avant	Last 4 digits of account number 452x	\$3,269.00			
	Nonpriority Creditor's Name 222 N Lasalle St Ste 1700	When was the debt incurred?				
	Chicago, IL 60601 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Credit card purchases				
4.2	Capital One Bank Nonpriority Creditor's Name	Last 4 digits of account number XXXX	\$1,483.00			
	PO Box 30281 Salt Lake City, UT 84130	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Credit card purchases				
4.3	Cavalry Portfolio Service	Last 4 digits of account number	\$1,210.00			
	Nonpriority Creditor's Name P.O. Box 27288	When was the debt incurred?	, ,			
	Tempe, AZ 85285 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Credit card purchases				

Debtor	Tina Dannette Bennett	Case number (if know)					
4.4	Comenity Capital/HSN	Last 4 digits of account number XXXX	\$1,286.00				
	Nonpriority Creditor's Name P.O. Box 182120 Columbus, OH 43218	When was the debt incurred?					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Credit card purchases					
4.5	Gateway One Lending	Last 4 digits of account number XXXX	\$1,403.00				
	Nonpriority Creditor's Name 3818 E Coronado Street Suite 100	When was the debt incurred?					
	Anaheim, CA 92807						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify					
4.6	Mobiloans	Last 4 digits of account number	\$1,195.00				
	Nonpriority Creditor's Name PO Box 1409 Marksville, LA 71351	When was the debt incurred?					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Line of Credit					

Debto	Ina Dannette Bennett	Case number (if know)	
4.7	NC Financial	Last 4 digits of account number XXXX	\$197.00
	Nonpriority Creditor's Name 175 W Jackson Blvd Suite 1000 Chicago, IL 60604	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	П	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	•	□ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes	Other. Specify Credit card purchases	
4.8	Nelnet Loan Services	Last 4 digits of account number	\$1,853.00
	Nonpriority Creditor's Name 3015 South Parker Road Suite 400	When was the debt incurred?	
	Aurora, CO 80014 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	■ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
		Student Loan	
4.9	Nelnet Loan Services	Last 4 digits of account number	\$4,638.00
	Nonpriority Creditor's Name 3015 South Parker Road Suite 400	When was the debt incurred?	
	Aurora, CO 80014 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	■ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
		Student Loan	

Official Form 106 E/F

Debto	Tina Dannette Bennett	Case number (if know)	
4.1	Nelnet Loan Services	Last 4 digits of account number	\$2,879.00
	Nonpriority Creditor's Name 3015 South Parker Road Suite 400	When was the debt incurred?	
	Aurora, CO 80014		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
		Student Loan	
4.1	Onemain	Last 4 digits of account number XXXX	\$6,558.00
	Nonpriority Creditor's Name	- <u> </u>	
	PO Box 1010	When was the debt incurred?	
	Evansville, IN 47706 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	<u> </u>		
	☐ Yes	Other. Specify	
4.1	SYNCB/Belk Nonpriority Creditor's Name	Last 4 digits of account number XXXX	\$572.00
	P.O. Box 965028 Orlando, FL 32896	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	■ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	

Tina Dannette Bennett	Case number (if know)					
SYNCB/Care Credit	Last 4 digits of account number XXXX	Unknowi				
Nonpriority Creditor's Name	Last 4 digits of account number XXXX	Olikilow				
P.O. Box 965036	When was the debt incurred?					
orlando, FL 32896-5036						
umber Street City State Zlp Code /ho incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	☐ Contingent					
Debtor 1 only						
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community lebt	☐ Student loans					
s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	Debts to pension or profit-sharing plans, and other similar debts					
Yes	■ Other. Specify Credit card purchases					
⊒ res	Other. Specify Credit card purchases					
SYNCB/Stein Mart	Last 4 digits of account number XXXX	\$213.00				
Nonpriority Creditor's Name	Last 4 digits of account flumber	ΨΞ.0.0				
P.O. Box 965005	When was the debt incurred?					
Orlando, FL 32896 Iumber Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply					
Debtor 1 only	☐ Contingent					
_	☐ Unliquidated					
Debtor 2 only						
Debtor 1 and Debtor 2 only	■ Disputed Type of NONPRIORITY unsecured claim:					
At least one of the debtors and another	Student loans					
☐ Check if this claim is for a community	☐ Obligations arising out of a separation agreement or divorce that you did not					
s the claim subject to offset?	report as priority claims					
No	\square Debts to pension or profit-sharing plans, and other similar debts					
☐ Yes	■ Other. Specify Credit card purchases					
SYNCb/TJX PLCC	Last 4 digits of account number XXXX	Unknowr				
Nonpriority Creditor's Name	When we the debt in some do					
PO BOX 965015 Orlando, FL 32896	When was the debt incurred?					
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	□ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt	☐ Obligations arising out of a separation agreement or divorce that you did not					
s the claim subject to offset?	report as priority claims					
No	\square Debts to pension or profit-sharing plans, and other similar debts					
□Yes	■ Other. Specify Credit card purchases					

Debtor 1	Tina Danr	nette Bennett		Case n	umber (if know)	
4.1						44.0== 00
6 V	ystar Cred onpriority Cred		Last 4 digits of account number	XXXX		\$1,877.00
	949 Blandi	ing Blvd. e, FL 32210	When was the debt incurred?			-
		City State Zlp Code	As of the date you file, the claim	is: Check	all that apply	
WI	ho incurred t	he debt? Check one.				
-	Debtor 1 only	у	☐ Contingent			
	Debtor 2 only	у	☐ Unliquidated			
	Debtor 1 and	d Debtor 2 only	☐ Disputed			
	At least one	of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
		s claim is for a community	☐ Student loans			
	ebt the claim sul	bject to offset?	Obligations arising out of a sep report as priority claims	aration ag	reement or divorce that you did not	
	No	.,	Debts to pension or profit-shari	ng plans, a	and other similar debts	
] Yes		■ Other. Specify Credit card			
	1 103		Other. Specify	a paron		-
4.1	/F/Dillards		Land Batter Construction	xxxx		\$417.00
1	onpriority Cred		Last 4 digits of account number			Ψ417.00
P	O Box 145	17	When was the debt incurred?			-
	es Moines	s , IA 50306 City State Zlp Code	As of the date you file, the claim	is: Chack	all that apply	
		he debt? Check one.	As of the date you me, the dam	is. Officer	ι απ τη ατ αρριγ	
	Debtor 1 only	V	☐ Contingent			
	Debtor 2 only	•	☐ Unliquidated			
		d Debtor 2 only	☐ Disputed			
	At least one	of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
	Check if this	s claim is for a community	☐ Student loans			
	ebt the claim sul	bject to offset?	Obligations arising out of a sep report as priority claims	aration ag	reement or divorce that you did not	
	No		Debts to pension or profit-shari	ng plans, a	and other similar debts	
] Yes		Other. Specify Credit card	d purch	ases	_
	•					-
		s to Be Notified About a Debt	•			
is trying t have mor	to collect from	m you for a debt you owe to some	ut your bankruptcy, for a debt that sone else, list the original creditor i ou listed in Parts 1 or 2, list the add ubmit this page	n Parts 1	or 2, then list the collection agency	y here. Similarly, if you
Name and A	•	•	which entry in Part 1 or Part 2 did you	u list the o	riginal creditor?	
Flynn La			e <u>4.3</u> of (<i>Check one</i>):	☐ Part 1: 0	Creditors with Priority Unsecured Clai	ms
1133 Sou Floor 2	uth Univer	sity Dr		Part 2: 0	Creditors with Nonpriority Unsecured	Claims
	ıderdale, F	L 33324				
		La	st 4 digits of account number			
Part 4:	Add the An	mounts for Each Type of Unse	cured Claim			
6. Total the		certain types of unsecured claims	. This information is for statistical	reporting	purposes only. 28 U.S.C. §159. Ad	d the amounts for each
					Total Claim	
Tota	6a.	Domestic support obligations		6a.	\$\$	_
claim	าร					
from Part	6b. 6c.	Taxes and certain other debts y	=	6b. 6c.	\$ 0.00	_
	6c. 6d.	Claims for death or personal inj Other. Add all other priority unsec	ury while you were intoxicated ured claims. Write that amount here.	6c. 6d.	\$ 0.00 \$ 0.00	_
						-
	6e.	Total Priority. Add lines 6a through	h 6d.	6e.	\$ 3,000,00	

Official Form 106 E/F

Case 3:18-bk-03810-PMG Doc 1 Filed 10/30/18 Page 27 of 53

Case number (if know)

Debtor 1 Tina Dannette Bennett

					Total Claim
	6f.	Student loans	6f.	\$	9,370.00
Total claims					·
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	19,680.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$_	29,050.00

Fill in this infor	rmation to identify your	case:		
Debtor 1	Tina Dannette Be	ennett		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have th r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.4	<u> </u>				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	-				
	Name				
	Number	Street			<u></u>
	City		State	ZIP Code	_

Case 3:18-bk-03810-PMG Doc 1 Filed 10/30/18 Page 29 of 53

Fill in this i	information to identify you	ır case:			
Debtor 1	Tina Dannette B				
200101	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
	es Bankruptcy Court for the:				
Officed State	es bankruptcy Court for the.	MIDDLE DISTRICT OF	FLORIDA		
Case numb (if known)	per				☐ Check if this is an amended filing
	Form 106H				
Sched	ule H: Your Co	debtors			12/15
•	•	n). Answer every question If you are filing a joint case, or		e as a codebtor.	
■ No □ Yes					
		ou lived in a community pr a, Nevada, New Mexico, Pu			y states and territories include
	Go to line 3. Did your spouse, former sp	ouse, or legal equivalent live	e with you at the time?		
in line Form 1	2 again as a codebtor only	/ if that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor lame, Number, Street, City, State and	ZIP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, line	е
	Name			Schedule E/F, I	
				☐ Schedule G, line	e
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	Name			Schedule E/F, I	
				☐ Schedule G, lin	
N	Number Street			<u> </u>	
C	City	State	ZIP Code		

Fill	in this information to identify your	case:						
Del	btor 1 Tina Danne	tte Bennett			_			
	btor 2 buse, if filing)				_			
Uni	ited States Bankruptcy Court for the	e: MIDDLE DISTRICT O	F FLORIDA		_			
	se number nown)							
0	fficial Form 106I					MM / DD/ Y	/YYY	
S	chedule I: Your Inc	ome						12/1
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and yo ch a separate sheet to this form.	are married and not filing wing spouse is not filing wing the top of any addition	ng jointly, and your sp th you, do not include	ouse i inforn	s living \ nation al	with you, incl bout your spe	ude information about ouse. If more space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-filing spouse	
	If you have more than one job,	Employment status	■ Employed			☐ Empl	oyed	
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not e	mployed	
	employers.	Occupation	Client Service Re	prese	ntative	_		
	Include part-time, seasonal, or self-employed work.	Employer's name	Shands Medical C	Center				
	Occupation may include student or homemaker, if it applies.	Employer's address	655 West Eight St Jacksonville, FL					
		How long employed th	nere? 3 Years,	7 Mon	ths			
Pai	rt 2: Give Details About Mo	nthly Income						
	imate monthly income as of the ouse unless you are separated.	date you file this form. If y	you have nothing to rep	ort for a	any line,	write \$0 in the	space. Include your no	n-filing
	ou or your non-filing spouse have me space, attach a separate sheet to		embine the information f	for all e	mployers	s for that perso	on on the lines below. If	you need
					For	Debtor 1	For Debtor 2 or non-filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2,833.13	\$ N/A	-
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$ N/A	

4. \$ 2,833.13

N/A

Calculate gross Income. Add line 2 + line 3.

Deb	tor 1	Tina Dannette Bennett	-	C	Case nu	ımber (<i>if kı</i>	nown)				
					For D	ebtor 1			Debtor		
	Con	y line 4 here	4.	_	\$	2,833	3 13	nor \$	n-filing s	pouse N/A	
	OOP.	y line 4 nere	•		Ψ	2,000		Ψ_		14/74	<u>-</u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	349	9.57	\$_		N/A	<u>. </u>
	5b.	Mandatory contributions for retirement plans	5b		\$		0.00	\$_		N/A	_
	5c.	Voluntary contributions for retirement plans	5c		\$		1.35	\$_		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$		0.00	\$_		N/A	
	5e. 5f.	Insurance Domestic support obligations	5e 5f.		\$ 		9.95 0.00	\$_ \$		N/A N/A	_
	5g.	Union dues	5g		\$		0.00	\$_		N/A	_
	5h.	Other deductions. Specify:	5h		\$			+ \$-		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$	533	3.87	\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		* —— \$	2,299		* — \$		N/A	_
			٠.		Ψ	2,23	7.20	Ψ_		11/7	_
8.	8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm									
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			_						
	Oh	monthly net income.	8a		\$		0.00	\$_ \$		N/A	_
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8b).	Φ		0.00	Φ_		N/A	_
	00.	regularly receive									
		Include alimony, spousal support, child support, maintenance, divorce	_		_			•			
	04	settlement, and property settlement.	8c		\$		0.00	\$_		N/A	_
	8d. 8e.	Unemployment compensation Social Security	8d 8e		\$		0.00	\$_ \$		N/A N/A	_
	8f.	Other government assistance that you regularly receive	00		Ψ		J.00	Ψ_		IN/A	_
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.									
		Specify:	8f.		\$	(0.00	\$		N/A	
	8g.	Pension or retirement income	 8g	J.	\$	(0.00	\$		N/A	<u> </u>
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$	(0.00	+ \$_		N/A	<u> </u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	(0.00	\$_		N/	A
10	Colo	vulate mentility income. Add line 7 L line 0	10.	\$		200.26	+ \$		NI/A	= \$	2 200 26
10.		sulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ	۷,	299.26	+ \$		N/A	= 5 _	2,299.26
11		e all other regular contributions to the expenses that you list in Schedule	, -								
	Inclu othe	de contributions from an unmarried partner, members of your household, your rfriends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not	depe							<i>J</i> . +\$	0.00
	·									_	
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							12.	\$	2,299.26
										Combi	
13.	Do y	ou expect an increase or decrease within the year after you file this form	?							month	ly income
		No.									
		Ves Explain:									

				<u> </u>		-		
	in this informa	tion to identify yo	our case:					
Deb	tor 1	Tina Dannet	te Benne	tt		Che	eck if this is:	
Deb	tor 2						An amended filing A supplement show	wing postpetition chapter
(Spo	ouse, if filing)							the following date:
Unit	ed States Bankr	ruptcy Court for the	: MIDDLI	E DISTRICT OF FLORIDA			MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J						
So	chedule	J: Your	Exper	nses				12/15
Be info	as complete a	and accurate as	possible eded, atta	If two married people ar ch another sheet to this				
Pari	t 1: Descr Is this a joir	ibe Your House	hold					
١.	No. Go to							
			in a separ	ate household?				
	□ м	0	•					
	□Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Del	btor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes
								□ No □ Yes
					-			□ No
								☐ Yes
								□ No
3.	Do vour exr	enses include						☐ Yes
0.	expenses o	f people other t d your depende	han $_{oldsymbol{\square}}$	No Yes				
Par		ate Your Ongoi						
exp				uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
	value of sucl		d have inc	cluded it on Schedule I: \	our Income		Your exp	enses
(•		,						
4.		or home owners and any rent for th		ses for your residence. I r lot.	nclude first mortgag	e 4.	\$	600.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's				4b.	\$	0.00
				ıpkeep expenses		4c.	·	100.00
5.		owner's associat		dominium dues our residence, such as ho	me equity loans	4d. 5.	·	0.00
٥.			y C	1001a01100, 00011 a0 110	oquity iodiio	٥.	Ψ	0.00

otor 1	Tina Dannette Bennett	Case num	ber (if known)	
Utili	ies:			
6a.	Electricity, heat, natural gas	6a.	\$	200.00
6b.	Water, sewer, garbage collection	6b.		0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		150.00
6d.	Other. Specify:	6d.	· .	0.00
	d and housekeeping supplies	7.	*	400.00
	dcare and children's education costs	8.	· <u> </u>	0.00
	ning, laundry, and dry cleaning	9.		40.00
	onal care products and services	10.		280.00
	ical and dental expenses	11.	·	25.00
	sportation. Include gas, maintenance, bus or train fare.		Ψ	25.00
	ot include car payments.	12.	\$	70.00
	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	40.00
	itable contributions and religious donations	14.	\$	0.00
. Insu	•		•	0.00
	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	3.92
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	135.00
15d.	Other insurance. Specify:	15d.	\$	0.00
Taxe	s. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spec		16.	\$	0.00
Insta	Illment or lease payments:			
17a.	Car payments for Vehicle 1	17a.	\$	421.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as			0.00
	icted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	· ·	0.00
	r payments you make to support others who do not live with you.		\$	0.00
Spec	·	19.		
	r real property expenses not included in lines 4 or 5 of this form or on Sche			
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	· ·	0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
20e.	Homeowner's association or condominium dues	20e.	·	0.00
. Othe	r: Specify:	21.	+\$	0.00
Colo	ulata yayır manthly aynancas			
	ulate your monthly expenses Add lines 4 through 21.		\$	2,464.92
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		Φ	2,404.92
			Φ	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	2,464.92
Calc	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,299.26
	Copy your monthly expenses from line 22c above.	23b.	· <u> </u>	2,464.92
_00.	Top, jouonan, oxponede nom into 220 abovo.	200.		2,707.32
23c.	Subtract your monthly expenses from your monthly income.			_
_50.	The result is your <i>monthly net income</i> .	23c.	\$	-165.66
	•			
	ou expect an increase or decrease in your expenses within the year after yo			
	xample, do you expect to finish paying for your car loan within the year or do you expect your ication to the terms of your mortgage?	mortgage	payment to increas	se or decrease because
_	, 5 5			
■ N				
\square Y	es. Explain here:			

Fill in this informa	ation to identify your	ase:			
Debtor 1	Tina Dannette Ber				
.	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bank	cruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Case number				,	☐ Check if this is an
,				'	amended filing
	on About a		Debtor's Sch		12/15
ii two married peop	pie are filing together	, both are equally respor	isible for supplying corre	ct information.	
obtaining money o	r property by fraud ir J.S.C. §§ 152, 1341, 1	connection with a bank	or amended schedules. N ruptcy case can result in	Making a false statement, of fines up to \$250,000, or in	concealing property, or nprisonment for up to 20
0.9					
Did you pay o	or agree to pay some	one who is NOT an attorr	ney to help you fill out bar	nkruptcy forms?	
■ No					
☐ Yes. Nar	me of person				Petition Preparer's Notice, gnature (Official Form 119)
	of perjury, I declare rue and correct.	hat I have read the sumr	mary and schedules filed	with this declaration and	
X /s/ Tina [Dannette Bennett		X		
	nette Bennett of Debtor 1		Signature of D	ebtor 2	
Date Oc	tober 30, 2018		Date		

Official Form 106Dec

Fill	in this inforn	nation to identify you	r case:								
De	btor 1	Tina Dannette B	ennett Middle Name	Last Name							
De	btor 2	Filst Name	Middle Name	Last Name							
	ouse if, filing)	First Name	Middle Name	Last Name							
Un	ited States Bar	nkruptcy Court for the:	MIDDLE DISTRICT OF F	LORIDA							
Case number					-	Check if this is an amended filing					
St	as complete a	of Financial		are filing together, both are	ankruptcy equally responsible for sup						
		n). Answer every ques		ane formi on the top of an	, additional pages, interpe	ii namo ana cacc					
Pa	rt 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before							
1.	What is your	current marital statu	s?								
	□ Married■ Not mar	ried									
2.	During the last 3 years, have you lived anywhere other than where you live now?										
	■ No □ Yes. Lis	NoYes. List all of the places you lived in the last 3 years. Do not include where you live now.									
	Debtor 1 Pr	Debtor 1 Prior Address:		Debtor 2 Prior Address:		Dates Debtor 2 lived there					
3. stat					ity property state or territory ico, Texas, Washington and W						
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).							
Pa	rt 2 Explai	n the Sources of You	r Income								
4.	Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.										
	□ No ■ Yes. Fill	in the details.									
			Debtor 1		Debtor 2						
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)					
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$26,477.52	☐ Wages, commissions, bonuses, tips						
			☐ Operating a business		☐ Operating a business						

Official Form 107

Debtor 1 Tin	a Dannette Benne	Case number (if known)								
		Debtor 1	1		Debtor 2					
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)				
For last calend (January 1 to D	ar year: December 31, 2017)	■ Wages, commissions, bonuses, tips	\$32,245.00	☐ Wages, commissions, bonuses, tips						
		☐ Operating a business		☐ Operating a	business					
	ar year before that: December 31, 2016)	■ Wages, commissions, bonuses, tips	\$30,967.00	☐ Wages, combonuses, tips	missions,					
		☐ Operating a business		☐ Operating a	business					
List each so		Debtor 1 Sources of income	-		ne 4.	Gross income				
		Describe below.	each source (before deductions and exclusions)	Describe below		(before deductions and exclusions)				
Part 3: List	Certain Payments Yo	ou Made Before You Filed for	Bankruptcy							
☐ No.	Neither Debtor 1 no	2's debts primarily consume r Debtor 2 has primarily consume r a personal, family, or househo	u <mark>mer debts.</mark> Consumer debt	s are defined in 11	U.S.C. § 101	(8) as "incurred by ar				
		efore you filed for bankruptcy, di	id you pay any creditor a tota	l of \$6,425* or mo	re?					
	☐ No. Go to line	*								
	paid that not includ	 each creditor to whom you pai creditor. Do not include paymer de payments to an attorney for the 	nts for domestic support oblig his bankruptcy case.	ations, such as ch	nild support ar					
	* Subject to adjustme	ent on 4/01/19 and every 3 year	s after that for cases filed on	or after the date of	of adjustment.					
	Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?									
	□ No. Go to line	e 7.								
	include p	w each creditor to whom you pai ayments for domestic support o for this bankruptcy case.								
Creditor's	Name and Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this pa	ayment for				
12800 Tu	Carmax Auto Finance 12800 Tuckahoe Creek Pkwy Henrico, VA 23238		h \$824.00	Unknown	☐ Mortgag ☐ Car ☐ Credit C ☐ Loan Re ☐ Supplier	ard				

Case number (if known)

	Creditor's Name and Address	Dates of payment	Total amount	Amount you	Was this payr	nent for
	5.5ano. 6 mano ana manos	Dates of paymont	paid	still owe	rias una payi	
	Specialized Loan Servicing PO Box 266005	\$600/month	\$1,800.00	\$51,269.00	■ Mortgage □ Car □ Credit Card □ Loan Repay □ Suppliers o □ Other	yment
7.	Within 1 year before you filed for bankrupte Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	ontrol, or owner of 20% of	neral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a general p ny managing age	partner; corporation int, including one for
	No☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	is payment
8.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos No		yments or transfer a	any property on a	ccount of a deb	t that benefited a
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for th	is pavment
			paid	still owe	Include credito	
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt. List all such matters, including personal injury modifications, and contract disputes.					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	case
	Calvary SPV, LLC v. Tina Bennett 16-2018-SC-006529	Small Claims	Duval County (Court 501 W. Adams	Street	□ Pending□ On appeal■ Concluded	
			Jacksonville, F	·L 32202		
10.	Within 1 year before you filed for bankrupton Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	shed, attached, s	seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happene	d			propert
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.		cluding a bank or fii	nancial institution	n, set off any am	ounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date	action was	Amoun
	Greater Hame and Hadres					, u

Debtor 1 Tina Dannette Bennett

Deb	otor 1 Tina Dannette Bennett		Case number	(if known)	
12.	Within 1 year before you filed for bankru	ptcy, wa	as any of your property in the possession of an	assignee for the bene	efit of creditors, a
	court-appointed receiver, a custodian, or			· ·	,
	■ No				
	☐ Yes				
Par	tt 5: List Certain Gifts and Contribution	ıs			
13.	Within 2 years before you filed for bankr	uptcy, d	lid you give any gifts with a total value of more t	han \$600 per person?	?
	No				
	Yes. Fill in the details for each gift.			_	
	Gifts with a total value of more than \$60 per person	00	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	_	uptcy, d	lid you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	NoYes. Fill in the details for each gift or c	ontributi	on		
	Gifts or contributions to charities that total		Describe what you contributed	Dates you	Value
	more than \$600 Charity's Name		,	contributed	
	Address (Number, Street, City, State and ZIP Code	e)			
Par	tt 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and	Doscri	be any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	Include	the amount that insurance has paid. List pending ce claims on line 33 of Schedule A/B: Property.	loss	lost
Par	rt 7: List Certain Payments or Transfers	5	,		
16.	Within 1 year before you filed for hankru	ntev di	d you or anyone else acting on your behalf pay	or transfer any prope	rty to anyone you
10.	consulted about seeking bankruptcy or	preparir			ity to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid		Description and value of any property	Date payment	Amount of
	Address		transferred	or transfer was	payment
	Email or website address Person Who Made the Payment, if Not Y	ou '		made	
	Cleaveland & Cleaveland, P.L.		Attorney Fees (Includes Filing Fee)	6/25/18,	\$1,800.00
	10001 Gate Parkway North			8/9/18,	
	Jacksonville, FL 32246 jaxconsumer@cc-lawoffice.com			8/30/18, and	
	jaxconsumer@cc-iawomce.com			10/15/2018	
	Mesquite Group		Credit Counseling Course	October 11,	\$24.00
	600 Six Flags Drive, Ste.400			2018	
	Arlington, TX 76011 www.themesquitegroup.org				
	w w w.memesquitegroup.org				

Debtor 1 Tina Dannette Bennett	Debtor 1	Tina	Dannette	Bennett
--------------------------------	----------	------	-----------------	---------

Case number (if known)

17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you I No	or to make payments			or transfer any proper	ty to anyone who
	☐ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and va	alue of any prop	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already No	siness or financial affair e as security (such as the	rs?			
	140 					
	Person Who Received Transfer Address	Description and va property transferre			any property or received or debts change	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankruptobeneficiary? (These are often called asset-prote No Yes. Fill in the details.		property to a s	elf-settled tr	ust or similar device o	f which you are a
		December and w	46			Data Transfer was
	Name of trust	Description and va	liue of the prop	erty transferr	ea	Date Transfer was made
Par	List of Certain Financial Accounts, Instr	ruments, Safe Deposit	Boxes, and Sto	rage Units		
 Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit un houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. 						
		ast 4 digits of account number	Type of accour instrument	clo mo	te account was osed, sold, oved, or insferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ar before you filed for	bankruptcy, any	<i>ı</i> safe deposi	t box or other deposit	ory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Str State and ZIP Code)		Describe the	contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within 1 y	ear before yo	ou filed for bankruptcy	/?
	■ No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or he to it? Address (Number, Str		Describe the	contents	Do you still have it?
		State and ZIP Code)				

Debtor 1 Tina Dannette Bennett

Case number (if known)

Par	9: Identify Property You Hold or Control for	Someone Else				
23.	3. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.					
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value		
Par	10: Give Details About Environmental Inform	ation				
For	he purpose of Part 10, the following definitions	apply:				
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, ground				
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		law, whether you now own, operate,	or utilize it or used		
	Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or		waste, hazardous substance, toxic	substance,		
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of wher	n they occurred.			
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	under or in violation of an environm	ental law?		
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any	release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or admini	strative proceeding under any envi	ronmental law? Include settlements	and orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	11: Give Details About Your Business or Cor	nnections to Any Business				
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have an	y of the following connections to an	y business?		
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)			
	☐ A partner in a partnership					
	☐ An officer, director, or managing execu	tive of a corporation				
	☐ An owner of at least 5% of the voting or equity securities of a corporation					

Case 3:18-bk-03810-PMG Doc 1 Filed 10/30/18 Page 41 of 53

Del	otor 1 Tina Dannette Bennett	Ca	se number (if known)
	■ No. None of the above applies. Go to I	Part 12.	
	☐ Yes. Check all that apply above and fill	I in the details below for each business.	
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	tcy, did you give a financial statement to a	nyone about your business? Include all financial
	■ No □ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Pai	t 12: Sign Below		
are with		false statement, concealing property, or o	declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.
/s/	Tina Dannette Bennett		
	na Dannette Bennett nature of Debtor 1	Signature of Debtor 2	
Dat	October 30, 2018	Date	
Did ■ N		ent of Financial Affairs for Individuals Filin	g for Bankruptcy (Official Form 107)?
Did ■ N	you pay or agree to pay someone who is no≀ √o		
\square	es. Name of Person . Attach the Bankru	uptcy Petition Preparer's Notice, Declaration, a	and Signature (Official Form 119).

Fill in this info	rmation to identify your	case:		
Debtor 1	Tina Dannette Be	ennett		
	First Name	Middle Name	Last Name	_
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	-
United States B	ankruptcy Court for the:	MIDDLE DISTRIC	T OF FLORIDA	_
Case number (if known)				☐ Check if this is an amended filing
Official Fo		on for Indiv	riduals Filing Under Cha	pter 7 12/15
				1210
If you are an inc	dividual filing under cha	apter 7, you must fil	l out this form if:	
creditors have	ve claims secured by ye	our property, or		
You must file th	ever is earlier, unless t	within 30 days after	ot expired. you file your bankruptcy petition or by the d e time for cause. You must also send copies	
	eople are filing togethe and date the form.	er in a joint case, bo	th are equally responsible for supplying corr	rect information. Both debtors must
	and accurate as possi your name and case nu		s needed, attach a separate sheet to this forn	n. On the top of any additional pages,
Part 1: List \	our Creditors Who Ha	ve Secured Claims		
For any credi information b		Part 1 of Schedule D	: Creditors Who Have Claims Secured by Pro	operty (Official Form 106D), fill in the
	reditor and the property	that is collateral	What do you intend to do with the propert secures a debt?	y that Did you claim the property as exempt on Schedule C?
Creditor's	Carmay Auto Einanc	Δ	Currender the preparty	Пма

Creditor's Carmax Auto Finance
name:

Description of property
securing debt:

Surrender the property.
Retain the property and redeem it.
Retain the property and enter into a
Reaffirmation Agreement.
Retain the property and [explain]:
continue to make regular payments

Creditor's Specialized Loan Servicing
name:

Description of property

FL 32209 Duval County

Surrender the property.

Retain the property and redeem it.

Retain the property and enter into a Reaffirmation Agreement.

Retain the property and levelain!

Retain the property and [explain]: continue to make regular payments

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

☐ No

Yes

Official Form 108

securing debt:

Debte	or 1	Tina Dannette Bennett	Case number (if known)
		ame: n of leased	□ No
	•	ame: n of leased	□ No □ Yes
		ame: n of leased	□ No □ Yes
		ame: n of leased	□ No
		ame: n of leased	□ No □ Yes
		ame: n of leased	□ No □ Yes
		ame: n of leased	□ No □ Yes
Part i	r pen	Sign Below alty of perjury, I declare that I have indicated rate in the subject to an unexpired lease.	y intention about any property of my estate that secures a debt and any personal
-	Tina	Dannette Bennett Uture of Debtor 1	X Signature of Debtor 2
	Date	October 30, 2018	Date

Fill in this	information to identify your case:					irected in this form and	d in Form
Debtor 1	Tina Dannette Bennett		122	2A-1Sup	p:		
Debtor 2 (Spouse, if fi	ling)			■ 1. Th	ere is no pres	umption of abuse	
United St	ates Bankruptcy Court for the: Middle District of	Florida	'			o determine if a presul nade under <i>Chapter</i> 7	•
Case nun	nber					cial Form 122A-2).	iviearis Test
(if known)						does not apply now be service but it could a	
				☐ Che	ck if this is a	n amended filing	
Officia	al Form 122A - 1						
Chapt	ter 7 Statement of Your Cu	rrent Mor	ithly Inc	ome	!		12/15
attach a se case numb qualifying i Part 1:	olete and accurate as possible. If two married people parate sheet to this form. Include the line number to ver (if known). If you believe that you are exempted finilitary service, complete and file Statement of Exemple Calculate Your Current Monthly Income	which the addition om a presumption ption from Presun	al information a of abuse becau	applies. C se you d	on the top of an o not have prin	ny additional pages, wri	te your name and or because of
	lot married. Fill out Column A, lines 2-11.						
	larried and your spouse is filing with you. Fill o		•	2-11.			
	larried and your spouse is NOT filing with you.	•	-		15 "		
	Living in the same household and are not leg						
_	Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evadi	legally separated	l under nonban	kruptcy	law that applie	es or that you and you	
101(10 <i>A</i> the 6 m	ne average monthly income that you received from all s). For example, if you are filing on September 15, the 6-n onths, add the income for all 6 months and divide the total sown the same rental property, put the income from that p	nonth period would I by 6. Fill in the res	be March 1 throught. Do not include	ugh Augu de any ind	st 31. If the amo	ount of your monthly incor ore than once. For examp	ne varied during ble, if both
				Column Debtor		Column B Debtor 2 or non-filing spouse	
	r gross wages, salary, tips, bonuses, overtime, oll deductions).	and commission	ons (before all	\$	2,881.94	\$	
3. Alim	nony and maintenance payments. Do not include mn B is filled in.	payments from	a spouse if	\$	0.00	\$	
of your from and	mounts from any source which are regularly pou or your dependents, including child support an unmarried partner, members of your househol roommates. Include regular contributions from a space in. Do not include payments you listed on line 3.	i. Include regular d, your depender	contributions nts, parents,	\$	0.00	\$	
	income from operating a business, profession,						
			tor 1				
	ss receipts (before all deductions)	\$ 0.00					
	nary and necessary operating expenses	-\$ 0.00	Copy here ->	¢	0.00	\$	
	monthly income from a business, profession, or far	rm \$	copy nere ->	φ	0.00	Φ	
6. Net	income from rental and other real property	Deb	tor 1				
Gros	ss receipts (before all deductions)	\$ 0.00					
	nary and necessary operating expenses	-\$ 0.00					
Net	monthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	
7. Inter	rest, dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

Tina Dannette Bennett			Case number	er (if known)			
			Column A Debtor 1		Column B Debtor 2 or non-filing s		•
Unemployment compensation			\$	0.00	\$		
Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	nt received was a bene	efit under					_
For you For your spouse	\$0	.00					
Pension or retirement income. Do not include any a benefit under the Social Security Act.			\$	0.00	\$		_
Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against hu domestic terrorism. If necessary, list other sources on total below.	Security Act or payme umanity, or international	nts al or					
·			\$	0.00	\$		_
			\$	0.00	\$		_
Total amounts from separate pages, if any.		+	\$	0.00	\$		_
Calculate your total current monthly income. Add I each column. Then add the total for Column A to the total for Column A		\$	2,881.94	+ \$		= \$_	2,881.9
						Tota	al current mont
						inco	ome
12a. Copy your total current monthly income from line Multiply by 12 (the number of months in a year)			СОР	y iiile TT			12
12b. The result is your annual income for this part of the	he form				12b.	\$_	34,583.2
Calculate the median family income that applies to	you. Follow these ste	ps:					
Fill in the state in which you live.	FL						
Fill in the number of people in your household.	1					_	
Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the ban	o online using the link s	specified	in the separ	ate instruc	13.	\$	46,677.0
How do the lines compare?							
14a. Line 12b is less than or equal to line 13. Go to Part 3.	On the top of page 1, c	heck box	1, There is	no presun	nption of abuse).	
14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	2, The pr	esumption o	f abuse is	determined by	Form	122A-2.
3: Sign Below							
By signing here, I declare under penalty of perjur	y that the information of	on this sta	atement and	in any att	achments is tru	ie and	correct.
X /s/ Tina Dannette Bennett							
Tina Dannette Bennett Signature of Debtor 1							
Date October 30, 2018							
MM / DD / YYYY							
If you checked line 14a, do NOT fill out or file For	rm 122A-2.						

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Debtor 1 Tina Dannette Bennett

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 04/01/2018 to 09/30/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Shands Jacksonville Medical Center

Year-to-Date Income:

Starting Year-to-Date Income: \$9,185.89 from check dated 3/29/2018. Ending Year-to-Date Income: \$26,477.52 from check dated 9/27/2018.

Income for six-month period (Ending-Starting): \$17,291.63.

Average Monthly Income: \$2,881.94.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

С	hapter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Middle District of Florida

		Middle District of Florida		
n re	Tina Dannette Bennett		Case No.	
		Debtor(s)	Chapter	7
	VER	IFICATION OF CREDITOR M	ATRIX	
	V EAC			
e abo	ove-named Debtor hereby verifies	that the attached list of creditors is true and corre	ect to the best	of his/her knowledge.
ate:	October 30, 2018	/s/ Tina Dannette Bennett		
		Tina Dannette Rennett		

Signature of Debtor

Tina Dannette Bennett 2570 Robert Street Jacksonville, FL 32209 Gateway One Lending 3818 E Coronado Street Suite 100 Anaheim, CA 92807 SYNCB/Stein Mart P.O. Box 965005 Orlando, FL 32896

Michael Ross Cleaveland Cleaveland & Cleaveland, P.L. 10001 Gate Parkway North Jacksonville, FL 32246

IRS P.O. Box 7346 Philadelphia, PA 19101-7346 SYNCb/TJX PLCC PO BOX 965015 Orlando, FL 32896

Avant 222 N Lasalle St Ste 1700 Chicago, IL 60601 Mobiloans PO Box 1409 Marksville, LA 71351 Vystar Credit Union 4949 Blanding Blvd. Jacksonville, FL 32210

BSI Financial Services PO Box 517314 S Franklin St Titusville, PA 16354 NC Financial 175 W Jackson Blvd Suite 1000 Chicago, IL 60604 WF/Dillards PO Box 14517 Des Moines, IA 50306

Capital One Bank PO Box 30281 Salt Lake City, UT 84130 Nelnet Loan Services 3015 South Parker Road Suite 400 Aurora, CO 80014

Carmax Auto Finance 225 Chastain Meadows Ct. NW Kennesaw, GA 30144-5841 Onemain PO Box 1010 Evansville, IN 47706

Cavalry Portfolio Service P.O. Box 27288 Tempe, AZ 85285 Specialized Loan Servicing P.O. Box 266005 Littleton, CO 80163

Comenity Capital/HSN P.O. Box 182120 Columbus, OH 43218 SYNCB/Belk P.O. Box 965028 Orlando, FL 32896

Flynn Lavrar 1133 South University Dr Floor 2 Fort Lauderdale, FL 33324 SYNCB/Care Credit P.O. Box 965036 Orlando, FL 32896-5036 B2030 (Form 2030) (12/15)

United States Bankruptcy Court Middle District of Florida

In re	Tina Dannette Bennett		Case N	0.				
		Debtor(s)	Chapter	7				
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR I	DEBTOR(S)				
С	ompensation paid to me within one year before the filing	1 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that a paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept			1,800.00				
	Prior to the filing of this statement I have received		\$	1,800.00				
	Balance Due		\$	0.00				
2. \$	335.00 of the filing fee has been paid.							
3. Т	The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
4. Т	The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
5. I	I have not agreed to share the above-disclosed compe	nsation with any other person	unless they are mo	embers and associate	s of my law firm.			
I	☐ I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name				ıy law firm. A			
6. I	n return for the above-disclosed fee, I have agreed to ren	der legal service for all aspect	s of the bankrupto	y case, including:				
b c	 Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of creditor [Other provisions as needed] Negotiations with secured creditors to reagreements and applications as needed. 	ment of affairs and plan which is and confirmation hearing, ar	may be required; and any adjourned l	nearings thereof;				
7. F	By agreement with the debtor(s), the above-disclosed fee Work for amendments, adversarial proce determine dischargeability, or other non-chapter, Rule 2004 examinations, or simi	edings, such as actions for standard core proceeding	or violation of s					
		CERTIFICATION						
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	payment to me for	or representation of th	ne debtor(s) in			
0	ctober 30, 2018	/s/ Michael Ross	Cleaveland					
Date		Michael Ross Cle		48				
		Signature of Attorne Cleaveland & Cle						
		10001 Gate Parkv	vay North					
		Jacksonville, FL 3 904-642-2040 Fa		Ī				
		jaxconsumer@co						
		Name of law firm						